

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

CABAL-KESSLER, ANGELA, , ,

Mailing Address 515 S DIVISION ST

City

AUDUBON

State

IA

Zip Code

50025

FEC ID number of contributing
federal political committee.

C

Name of Employer

COLLABORATIVE MGMT PLASTICITY/KES

Occupation

CONSULTANT

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

702.04

Transaction ID : SA17A.6012

Date of Receipt

MM / DD / YYYY
06 / 17 / 2017

17

2017

Amount of Each Receipt this Period

50.00

☐

Memo Item

B. Full Name (Last, First, Middle Initial)

CABOT, MICHELE, , ,

Mailing Address 1342 SNYDER ROAD

City

GREEN LANE

State

PA

Zip Code

18054

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Transaction ID : SA17A.6014

Date of Receipt

MM / DD / YYYY
04 / 01 / 2017

01

2017

Amount of Each Receipt this Period

50.00

☐

Memo Item

C. Full Name (Last, First, Middle Initial)

CABOT, MICHELE, , ,

Mailing Address 1342 SNYDER ROAD

City

GREEN LANE

State

PA

Zip Code

18054

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Transaction ID : SA17A.6015

Date of Receipt

MM / DD / YYYY
05 / 01 / 2017

01

2017

Amount of Each Receipt this Period

50.00

☐

Memo Item

Subtotal Of Receipts This Page (optional).....

150.00

Total This Period (last page this line number only)